



# Redeployment Medical Briefing



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# Re-deployment Medical Briefing

- **Purpose of this briefing**
- **Background on health concerns**
- **Health threats from this region**
- **Re-deployment medical requirements**
- **Homecoming Stress**
- **Summary and where to get more information**



# Purpose of this briefing

**To ensure that any concerns you may have about health issues are addressed and to review the medical requirements for re-deployment.**



# Background

- **Over 300,000 US and Coalition Forces are re-deploying from support of Operation Iraqi Freedom.**
- **Of utmost importance is force health protection and addressing concerns about health issues.**



# Medical Requirements for Re-deployment

- **Post-deployment medical threat briefing**
- **Completing the Post-Deployment Medical Health Assessment (DD Form 2796)**
- **Receiving post-deployment medical screening (of 2796), testing, and follow-up**
- **Continuing malaria medication for 4 weeks**
- **Understanding where to go for health problems or concerns**



# Soldier Medical Readiness Requirements

- **SRP:** Soldiers Readiness Processing - Semi-annual, updating medical readiness to include immunizations and medical records documentation (Medical Protection System (MEDPROS), etc)
- **PDP:** Predeployment Processing - Soldiers actually going down range, updating medical readiness to include medical threat briefing, Predeployment Health Assessment Form DD 2795, immunizations, and medical records documentation (MEDPROS, etc), DD 2766 (Yellow Jacketed Medical Record)
- **RDP:** Redeployment Processing - Completed downrange - Medical briefs and DD Form 2796 Post Deployment Health Assessment. Home station (within 5 working days) - DD Form 2766 returned to med records, Blood Draw, TB Skin Test (initial and 90-180 days), Follow-up health care. If any step is NOT completed downrange, then it is done at home station.



# Medical Threats for the Region

- **Threat Categories**
  - **Infectious**
  - **Vector borne**
  - **Animal associated**
  - **Environmental**
- **Diarrheal diseases**
- **Tuberculosis**
- **Malaria**
- **Dengue**
- **Meningococcal Meningitis**
- **Leishmaniasis**
- **Q-Fever**
- **Rabies**
- **Sandfly Fever**
- **Schistosomiasis**
- **Typhoid/Paratyphoid**
- **Typhus**
- **Boutonneuse Fever**
- **West Nile Fever**
- **Leptospirosis**



# Malaria Medication

- **Complete all malaria medications prescribed!**
  - **Continue daily Doxycycline for 4 weeks after departure**
  - **Begin Primaquine on day of departure, take 15 mg per day for 14 days**
  - **For 2 weeks after deployment you will be taking Primaquine together with Doxycycline**
  - **Failure to complete malaria medication can result in malaria infection after deployment\***



# Blood Donation

- **If you get malaria you will be deferred from donating blood for 3 years**

**Soldiers who have been to malarious areas (Iraq), cannot donate blood for 1 year after departing the area and after stopping malaria medication.**



# Post-deployment questions and concerns

- **Step 1**
  - **Contact your local MTF for problems, questions, or concerns noticed after re-deployment.**
- **Step 2**
  - **If you feel ill, your primary health care provider can do an initial assessment. If symptoms persist or your condition is not improving, request a referral to a specialist.**



# Reunion With Family And Friends

- Reunion is a part of the deployment cycle and can be filled with joy and stress.
- Refer to the ***A Soldier and Family Guide to redeploying*** for things to remember during reunion with family and friends.
- Chaplains and counselors are available to help cope with homecoming stress



# Summary

- **Post Deployment Requirements**
- **Potential health threats**
- **Completion of DD Form 2796**
- **Where to go for health information**
- **Homecoming Stress**



# Conclusion

**It is important to the US military and the Nation that you enjoy good health as soldiers, family and friends join together again.**

**If you have health problems or concerns, it is critical that you let someone know.**